



Sign Permit Application

City of Wood Village

24200 NE Halsey St., Wood Village OR 97060

Banner Fee:	Permit No:
\$20.00 each	Date Issued:
All Other Signs:	Issued By:
\$100.00 each	Receipt No:

Phone: 503.489.6861 or 503.489.6859

Fax: 503.669.8723

E-mail: Building@woodvillageor.gov

ALL APPLICATIONS SHALL BE ACCOMPANIED BY A DETAILED SKETCH DRAWN TO SCALE, OF EACH PROPOSED SIGN SHOWING GRAPHIC DESIGN AS WELL AS STRUCTURAL DESIGN DATA AND A SITE PLAN.

I. NAME OF BUSINESS: _____

ADDRESS OF BUSINESS: _____

(NAME OF APPLICANT)

(NAME OF CONTRACTOR)

(STREET ADDRESS)

(STREET ADDRESS)

(CITY/ZIP)

(CITY/ZIP)

(PHONE)

(PHONE)

(FAX)

(FAX)

II. REQUEST INSTALLATION OF ☐ FREE-STANDING SIGN ☐ WALL SIGN

III. STREET FRONTAGE: NO. OF FRONTAGE(S) _____ LENGTH OF FRONTAGE _____

IV. DESCRIPTION OF SIGN(S):

DIMENSIONS: Free-standing sign: _____ X _____ Wall sign: _____ X _____

Portable A-frame sign: _____ X _____ Frame height: _____

Primary building face dimensions: _____ X _____

() Single face

() Double face

ILLUMINATION: () Non-illuminated () Illuminated (explain type & color)

(Fluorescent Tubes - 800 MA Maximum)

COLOR: Background: _____ Letters (size, color): _____

V. INSTALLATION OF SIGN - FREE-STANDING SIGN:

Post(s) size _____ x _____ Anchored _____ feet below grade.

Concrete base around post, size: _____ x _____

Height: _____ feet overall height above grade.

_____ feet clearance from bottom of sign to grade.

WALL SIGN INSTALLATION: () On canopy or marquee
() Structurally designed on wall
() Other (explain) _____

PORTABLE A-FRAME SIGN: Describe means of anchoring sign _____

VI. ADDITIONAL INFORMATION (ATTACH SKETCH)

I certify that I have read the foregoing application and know the contents to be correct to the best of my knowledge and belief.

APPLICANT'S SIGNATURE

DATE

OWNER'S SIGNATURE (IF OTHER THAN APPLICANT)

DATE

.....
☐ APPROVED

☐ NOT APPROVED

NOTE: Approval of this application is dependant upon Building and/or Electrical Code and Wood Village Zoning Code compliance.

COMMENTS OR CONDITIONS: _____

CITY MANAGER

DATE